

Skin sarcoidosis: the great pretender

**George Zacharis,
Kostas Kaltsas,
Andreas Koulelides,
Demosthenes Bouros.**

Department of Pneumology, Medical School, Democritus University of Thrace and University Hospital of Alexandroupolis, Greece

Skin sarcoidosis occurs in 20-35 % of patients and may occur without systemic involvement. Due to the variety of the lesions, cutaneous sarcoidosis is known as one of the “great imitators” in dermatology. Involvement range from mild to severe, could be self-limited or chronic, and local or extensive.

Specific manifestations include papules, plaques, lupus pernio, scar sarcoidosis, and rare morphologies such as alopecia, ulcers, hypo/hyper-pigmented patches, and ichthyosis.

Recognition of cutaneous lesions is important because they provide a visible clue to the diagnosis and are an easily accessible source for histology.



FIGURE 1. Violaceous plaques of the lower anterior surface of the abdomen in a patient with stage II sarcoidosis..



FIGURES 4 & 5. Sarcoidosis scar infiltration in an open surgical thoracotomy incision.



FIGURE 2. Sarcoidosis of the interior surfaces of both legs in a patient with stage II sarcoidosis after corticosteroid withdrawal.



FIGURE 3. Hyperpigmented plaque of sarcoidosis on the anterior surface of the knee.



FIGURE 6. Sarcoid papule of the anterior surface of knee.

Correspondence:

Prof. Demosthenes Bouros MD, PhD, FCCP
Head, Dept Pneumology, Medical School,
Democritus University of Thrace
68100 Alexandroupolis
Tel. & Fax: +30-25510-75096
e-mail: debouros@gmail.com